(c) P3 cases reported since 2001.

State	2001	2002	2003	2004	2005	2006
Uttar Pradesh	54	100	16	6	4	
Bihar	1	-	1	1	-	
Delhi	1	5	-	-	-	
Jharkhand	-	-	1	-	-	
Haryana	-	3	1	-	-	
West Bengal	-	1	3	-	-	
Uttaranchal Pr.	-	3	1	-	-	
Rajasthan	-	1	-	-	-	

New Medical Colleges in Karnataka

1284. SHRI K.B. KRISHNAMURTHY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the present status of proposals received from Karnataka for the approval to start new Government and private medical and dental colleges in the State during 2006-07?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): A total of 10 (7 for medical college and 3 for dental college) proposals have been received from State of Karnataka. These proposals have been referred to the professional Councils for evaluation. Clearance of these proposals depends on fulfillment of qualifying criteria prescribed in the Regulations of respective Council, availability of infrastructural facilities and recommendations of the concerned councils thereon.

Ayurvedic and Unani Institutions

†1285. SHRI MANGANI LAL MANDAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that hundreds of degrees are awarded by a number of Ayurvedic and Unani Educational Institutes being run at national level across the country, whose courses are yet to get approval from competent authority;

† Original notice of the question was received in Hindi.

(b) whether it is also a fact that CAQ in its report for the year ending 31 st March, 2004 have made adverse comments with regard to the studies and teaching conducted by these institutions as also the scarcity of infrastructure and deviation and expenditure of the funds receive; and

(c) if so, the action taken by Government in this regard and the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) At present 221 Ayurveda, 38 Unani and 7 Siddha colleges are conducting under-graduate and post-graduate courses in these systems of medicine throughout the country. These colleges are affiliated with 47 Universities of the country. As per the provision of India Medicine Central Council (IMCC) Act, 1970, the concerned University/Board is required, as per the provisions of Section 14(2) of the Act, to approach the Government of India for the recognition of the degree/qualification awarded by them and inclusion of the same in the 2nd Schedule of the Act. It is true that some of the Universities and degrees awarded by them are not included in the 2nd Schedule of IMCC Act, 1970 due to the any of the following reasons:-

(i) Some Universities have been renamed and they have to approach the Central Government for inclusion in the 2nd Schedule under the changed name.

(ii) Some University are not following the nomenclature of degrees laid down by the Central Counvil of India Medicine (CCIM).

(iii) Some States Health Universities have been set up but they are not taking prompt action to get their name included in the 2nd Schedule as per the provision of the IMCC Act, 1970.

(b) and (c) The CAG in its report for the year ended 31 st March, 2005 has observed that test check of records of 142 colleges which were inspected by the regulatory councils during 2000-2005 revealed that they did not meet minimum requirement of infrastructure and teaching facilities prescribed by the Council. In view of the mushroom growth of sub-standard AYUSH colleges, the Central Government enacted the IMCC (Amendment) Act, 2003 to provide for prior permission of the Central Government for starting new colleges or higher courses and increase in admission capacity. Further the Department of AYUSH is implementing a Centrally Sponsored Scheme "Development of Institutions" under which

it provides assistance to AYUSH institutions for upgradation. A panel of experts approved by the Department has been sent to CCIM for ensuring that the visitation/inspection of colleges and new applicants are carried out by experts from the panel so that no new substandard colleges are opened. Further, the existing colleges which were opened before the amendment of the Act in 2003 are also required under the Act to fulfill the minimum infrastructural requirement and teaching facilities by 7th November, 2006.

Eradication of TB

1286. SHRI S.M. LAUAN BASHA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have taken all steps to eradicate TB in the country;

(b) the details of such plans and programmes of Government to eradicate TB;

(c) whether it is a fact that a very virulent from of TB has again surfaced in the country, carrying great immunities, etc.; and

(d) if so, the steps proposed to tackle the problem of TB in the country?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANIRAMDOSS): (a) and (b) Due to epidemiological situation pertaining to TB disease, it is not feasible to target for its eradication, presently. However, to control TB, the Revised National TB Control Programme (RNTCP) widely known as DOTS, which is a WHO recommended strategy, is being implemented in the country since year 1997, with an objective to achieve cure rate of 85% of new sputum positive cases and to detect at the least 70% of such cases. Under-the programme, drugs are provided free of cost in patient-wise boxes. By January 2006,1083 million (97%) of the population in 620 districts/reporting units is getting benefited by DOTS strategy. Only 14 districts are yet to implement RNTCP. These are in the final stages of preparation and the entire country will be covered under RNTCP during the financial year 2005-06. The Project districts have reported treatment success rate more than 85% which means that more than 8 out of every 10 patients put on treatment under the revised strategy are being successfully treated as against below 4 in the earlier programme. To make the programme more